Evidence Table 3
Evidence for Genetic Contribution to the Susceptibility to Dental Caries through MHC Analysis

Year	Authors	Study Design	Study Pop.	Controls	Genetic Analysis	Caries & Tooth Assessment	Data Analysis	Conclusions
1981	Lehner et al	Matched groups	Low DMFS (1) 23 yrs old	High DMFS (18)	HLA typing	DMFS	F-test p<0.0008	Significant relationship HLA DRw6,1,2,3 and caries experience
1985	de Vries et al	Matched pairs	military recruits caries-free	military recruits caries-active	HLA-Drw6 on blood cells	DMFS	F-test	No relationship of HLA DRw6 and caries incidence
1994	Mariani et al	Independent groups	82 celiac patients	189 normal	Serology for celiac disease	Enamel Defect determination	ANOVA p<0.005	HLA DR3 increased risk of dental lesions, HLA-DR5,7 protected from defects
1996	Aine	Correlative	Adults & children with celiac disease	same group	Serology for celiac disease	Enamel Defect determination	Correlation	HLA-DR3, extended haplotype A1,B8 correlated with enamel defects
1997	Aguirre et al	Correlative	137 celiac disease patients	same group	celiac disease & & HLA serology DR7, DR3, DQ2	Enamel Defect determination	Correlation	Celiac disease HLA DR3 increased enamel defects p<0.006, no caries effects
1998	Senpuku etal	In vitro	Nine adult donors	HLA Types	Serology for HLA	S. mutans antigen binding to HLA	Observational	S. mutans antigen bound to HLA DR8, DR5 and DR6 most strongly
1999	Acton et al	Comparative	186 primiparous African-American women	same group	HLA typing on blood cells	DMFS and levels of S. mutans	Chi-square Fisher's exact p<0.005 DRB1	DRB1-3 & BRB1-4 linked to high levels of S. mutans No correlation to DMFS